

2009-2010 Gallatin County 4-H Enrollment Form

FOR OFFICE USE ONLY

COUNTY CODE:_____ CLUB CODE:_____ MEMBER CODE:_____

GALLATIN COUNTY 4-H
201 WEST MADISON, STE 300
BELGRADE, MT 59714

**Annual Fees: Members= \$20 (maximum family \$50) Cloverbud= \$5 Leader= \$5
plus \$1.00 per project for material fees**

Club:_____

Category **(Check One)**:

Member (age 9-19 by end of 4-H year): _____ 1st Year _____ Re-enrollment

Cloverbud (age 6-8 by end of 4-H year): _____ 1st Year _____ Re-enrollment

Last Name:_____ **First Name**_____ M.I._____

Address:_____ **City**_____ **State**_____ **Zip**_____

Youth Member E-mail: _____ **Youth Member's Cell Phone:** _____

School:_____ **Grade** _____ **# of Years in 4-H (including Cloverbuds)** _____

Gender:_____ **Birthday**_____/_____/_____ **4-H Age (age you will be after October 1st):**_____

Ethnic (Circle one): Hispanic Not Hispanic

Race (Circle one): White Black Asian Amer. Ind./Alaskan
White & Black White & Asian White & Amer. Ind./Alaskan
Black & Amer. Ind./Alaskan Hawaiian/Pac. Island
Other Mix

Residence (Circle one): Farm Rural-under 10,000 Town-between 10,000-50,000

Project Code	Project Name	Teen Leader	Need Books	Years in Project
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____
_____	_____	Yes/No	Yes/No	_____

Parent / Guardian Information

MOM: (Legal guardian?____Yes ____No)

Name_____

Address:_____

City, ST, Zip_____

E-mail Address_____

Home Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____

Occupation (optional): _____

Work Phone (_____) _____ - _____

DAD: (Legal guardian?____Yes ____No)

Name_____

Address_____

City, ST, Zip_____

E-mail Address_____

Home Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____

Occupation (optional): _____

Work Phone (_____) _____ - _____

Does anyone in your family serve in the U.S. Military, National Guard or Reserves? ____ Yes ____ No

I want the Extension Office to be aware of the following disability: _____

Media Release:

I, (name) _____,

(please initial one as the parent/guardian) _____ authorize, _____ do not authorize Gallatin County MSU Extension Service to use photograph(s) of my child that were taken during a 4-H related event or activity on the Extension Website, press releases, newsletters, and other publicity related to 4-H activities.

The Extension Office will not use personal details or full names (first and last) of any child in a photograph on our web site. We will not include personal e-mail or postal addresses, telephone or fax numbers on our website or in other printed publications. We may use the name of the child in accompanying text or a photo caption. We may use group or photographs with very general labels. We will only use images of children in suitable dress, to reduce the risk of inappropriate use of images.

I hereby release the Gallatin County 4-H Program, Montana State University and any photographer chosen by them to photograph my child from any and all claims for damages for libel, slander, invasion of privacy or any other claim based upon the use of my child's photograph and information about him/her for this purpose. Signed _____

Gallatin County Code of Conduct

It is the 4-H program's intent that your participation in 4-H events and activities to be filled with exciting experiences, new friendships and fun. To ensure a positive experience for all participants, it is expected that each participant be considerate of others, participate fully in the programming and observe the following expectations (if a situation or question arises which is not clearly covered by this list, ask a chaperone or staff person before acting).

- I will conduct myself at all times in order to be a credit to the club, school and community.
- I will dress neatly and appropriately for the occasion.
- I will show respect for the rights of others to be courteous at all times.
- I will be honest and not take unfair advantage of others.
- I will respect the property of others.
- I will refrain from loud boisterous talk, swearing and horseplay.
- I not use my personal vehicle when it is not allowed by an event or trip.
- I will demonstrate sportsmanship in the contests and meeting, modesty in winning and generosity in defeat.
- I will attend sessions promptly and respect the opinion of others in discussion.
- I will not purchase or have in my possession any kind of alcoholic beverage or drugs.
- I will care for the motel/hotel property and respect the rights of other guests of the motel/ hotel.
- I will be in my room and stay there after curfew time and I will be dressed and out of my room each day by the set time given by the chaperon(s).
- I will be prepared to report to my club and other clubs knowledge gained by attending these activities.
- I will respect supervision at all times, being responsible to all adults connected with the trip or event.

4-H Member's Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____